POSITION	INITIALS	ID NO.	DATE
ger ^a			-
FEE DETERMINATION	POA	70381	.14
O.I.P.E. CLASSIFIER		1/2	9110/00
FORMALITY REVIEW	- A	7333	11/6/
RESPONSE FORMALITY REVIEW	TAME	17/19/16	4-76-0

INDEX OF CLAIMS

Rejected	N Non-elected
= Allowed	IInterference
 (Through numeral) Canceled 	A Appeal
÷ Restricted	O Objected

Claim	Date	Claim	Date	Claim	Date	
Final Original 415/64		Final Original		Final		
11/20		I O	4-1-1-1-1-1	it o		
241		52		101		
(3)		53		102		
 		54		104		
5		55		105	 	
6		56		106	 	
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8		58		108		
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16		66		116	+	
16 17		67		117	 	
18		68		118	 	
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22		72		122		
23)		73		123		
25	+++++	74 75		124		
26	 	76	++++	125	 - - - - - - 	
27	 	77	 	126		
28		78	 	128	 	
29		79		129	 	
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41		91		141		
42		92		142		
43		93		143		
44		94		144		
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48		97		147		
49	 - - - 	99		148		
50		100		149 150		
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If more than 150 claims or 10 actions staple additional sheet here